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PTO/SB/21 (01-08)
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Application Number	10/570,764			
Filing Date	August 22, 2006			
First Named Inventor	Jens Laurvig HAUGAARD			
Art Unit	3753			
Examiner Name	J. C. Fox			
Attorney Docket Number	50906			

ENCLOSURES (Check all that apply)									
✓		smittal Form ee Attached	Drawing(s) After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences						
	Amendment Amendm	ent/Reply fter Final ffidavits/declaration(s) n of Time Request Abandonment Request on Disclosure Statement Copy of Priority	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD Remarks Substitute Specification Marked-Up Specification Petition (Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Request for Refund Description Status Letter Other Enclosure(s) (please Identify below):						
	•	SIGNA	TURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm N	Firm Name Roylance, Abrams, Berdo & Goodman, L.L.P. (Customer No. 01609)								
Signature May Bu			he						
Printed name Mark S. Bicks									
Date July 29, 2008		July 29, 2008	Reg. No. 28,770						

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Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/570,764 **Application Number** FEE TRANSMITTAL Filing Date August 22, 2006 For FY 2008 First Named Inventor Jens Laurvig HAUGAARD J. C. Fox **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 3753 Art Unit

TOTAL AMOUNT OF PAYMEN	IT (\$)	120	Attorney Do	cket No.	50906						
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 18-2220 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
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FEE CALCULATION					•						
1. BASIC FILING, SEARCH, AND EXAMINATION FILING FEES Small Entity		ES SE/ <u>all Entity</u>	FEES SEARCH FEES Small Entity		IINATION FEES Smail Entity						
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2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Small Entity Fee (\$) Fee (\$) 25 105 Multiple dependent claims 370 185											
13 - 20 or HP = HP = highest number of total clain	ns paid for, if tra Claims	x <u>50</u> = greater than 20. <u>Fee (\$)</u> <u>F</u> x <u>210</u> =	ee Paid (\$) 0 ee Paid (\$) 0		<u>Multiple D</u> <u>Fee (\$)</u>	ependent Claims Fee Paid (\$)					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
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Other (e.g., late filing surcharge): 1-Month Extension of Time											
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